

SEMI-ANNUAL LOBBYING EXPENDITURE REPOR

INSTRUCTIONS: This Semi-Annual Lobbying Expenditure Report is for reporting all expenditures relating to dobying in the State of Tennessee. Pursuant to T.C.A. § 3-6-303(a), this Report is due within forty-five (45) days after the conclusion of the six-month periods ending March 31 and September 30. The Report must be filed with the Tennessee Ethics Commission, 201 4th Avenue North, Suite 1820, Nashville, TN 37243. If you have guestions, please feel free to contact the Commission at (615) 253-8634 or e-mail us at ethics.counsel@state.tn.us. You must complete every Item. Attach additional pages as necessary. Please note that the information listed on this Report will be posted on the Commission's website as required by T.C.A. § 3-6-303(3)(b).

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1	а.	DATE OF DISCLOSURE MAY IC	<u>),2007 </u>	
	b.	REPORTING PERIOD [check box]:	≚October 1 – March 31	□ April 1 – September 30
2.	a.	NAME OF CORPORATION/ENTITY	Southern Land Company	
	b.	NAME OF CEO, CFO, or TITLE AND LOBBYISTS	NAME of PERSON RESPON	SIBLE FOR SUPERVISING
Time	othy W.	Downey, President & CEO		
3.	a.	ADDRESS Street or Rural Route	City	State Zip Code
501	Corpor	ate Centre Drive, Suite 600	Frank1:	in, IN 37067
	Ъ.	PHONE NUMBER (615)778-3150		
4,	LOBB,	YING INTERESTS		
	a.	List the general subject area(s) lobbled, e	.g., "healthcare," "insurance;" e	łc.
Ecc	nomic	& Industrial Development; Sta	te Agencies, Boards &	Commissions
<u>i Patt</u> Jung J				
	b.	Describe the general nature and interest of insurance company," "professional associations of the company of th	of the entity employing or retain	ing lobbying services, e.g.
Rea	l Esta	te Development	iauon, etc.	

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	Page 2 of 3 COMPENSATION. The term "compensation" is defined by T.C.A. § 3-6 abursement or other valuable consideration, or any combination thereo compensation' does not include the salary or reimbursement of a person's regular employment."	
activities shall be apportioned to reflect the lot more detailed definitions of "Lobbying." "Adn	f lobbyist compensation paid by the employer. For purposes of the who performs duties for the employer in addition to lobbying and relate obyist's time allocated for lobbying and related activities in this state (se ninistrative Action" and "Legislative Action," and exceptions thereto, 103(a)(1)(A)-(K). (Check the appropriate box.)	
₩ Less than \$10,000	☐ At least \$10,000 but less than \$25,000	
☐ At least \$25,000 but less than \$50,000	☐ At least \$50,000 but less than \$100,000	
☐ At least \$100,000 but less than \$150,000	☐ At least \$150,000 but less than \$200,000	
☐ At least \$200,000 but less than \$250,000	☐ At least \$250,000 but less than \$300,000	
☐ At least \$300,000 but less than \$350,000	☐ At least \$350,000 but less than \$400,000	
☐ If the aggregate total amount is \$400,000 or mor thousand dollars (\$50,000):	e, you must round the aggregate total to the nearest fifty	
box. Attach additional pages as needed. At LOBBYIST NAME Courtney Pearre	<u>IN-HOUSE LOBBYIST</u>	
Mike Mizell		
James Weaver		
Excluding lobbylst compensation (which is a the employer to third party vendors, for the popinion or grassroots action in the State of relating to printing, publishing, advertising, broadigital video discs, infomercials, rallies, demorposts, internet services, public relations services, public relations services.	any expenditure made for the purpose of achieving a multi-state hose states. "eported under 5), state the aggregate total of expenses paid directly by urpose of influencing legislative or administrative action through public Tennessee. These expenditures include, but are not limited to, costs adcasting, paid announcements, audiotapes, videotapes, compact discs, nestrations, seminars, lectures, conferences, postage, telephone related less, governmental relations services, polling services, travel expenses, lons or any other expense incurred lobbying. Authority: T.C.A. 6.3.6.	
☑ Less than \$10,000	☐ At least \$10,000 but less than \$25,000	
☐ At least \$25,000 but less than \$50,000	☐ At least \$50,000 but less than \$100,000	
☐ At least \$100,000 but less than \$150,000	□ At least \$150,000 but less than \$200,000	
☐ At least \$200,000 but less than \$250,000	☐ At least \$250,000 but less than \$300,000	
☐ At least \$300,000 but less than \$350,000	☐ At least \$350,000 but less than \$400,000	
	, you must round the aggregate total to the nearest fifty	

SS-8011

8. AGGREGATE TOTAL OF ALL IN-STATE EVENTS	
State the aggregate total amount of all employer expenditures for all in-Stareported to the Commission pursuant to T.C.A. § 3-6-305(b)(8). Authority None	ate event(s) which was or should have bee : T.C.A. § 3-6-303(a)(3).
9. TO BE SIGNED BY REPORTING OFFICIAL (must be attested	l to by a witness)
I certify that the information contained in this Report is true and the best of my knowledge, information and belief.	it it is a complete and accurate report to th
Jun / A	\$\langle 8\langle 6\langle 0.7\langle 0.7
Signature of Person Completing Report Print Name of Person: Alx (S.L.)	Date
I, the undersigned, acknowledge that I have reviewed the foregoing accurate to the best of my knowledge, information and belief.	ng Report and certify that is complete and
GARM Solvery	5/8/07
Signature of CEO, CFO or Authorized Representative Print Name of Person: Time 7My W. Down Ey	Date
J. Dovaco M. CAIRE, the undersigned, do hereby witness (Printed Name of Witness) CFO or Authorized Representative,	the above signature of the CEO, which was signed in my presence,
Douardly Cairo	5.8.67
Signature of Witness	Date

